You must use b	lack ink to fill out this form.	
Your Name:		<u> </u>
Mailing Address:		<u> </u>
Telephone:	Message phone:	<u> </u>
NOTE: If for any reas	son you do not wish the other party to know ss, you must still provide a mailing address se other party can serve you by mail.	
	IN THE SUPERIOR COURT FOR T	
	City or Town where the C	Court is located
)	
Plaintiff,)	
VS.)))	
Defendant.)	V 0 N
-)	Your Case No
	CERTIFICATE OF S	CEDVICE
This is to certify th	at on ,, I [_] mailed	personally delivered a copy of this
Certificate of Serv	ice and a copy of the following docume	nts
to the attorneys documents were n		listed below (list name and address where
Date		Your Signature